	And I, the said Alm			
-	and confirm and pron			
	er my attorney shall l by virtue of these pre	-		
-	the revocation of thes			
	notice of such revocati	• • •		
clare that as	against me and all per	rsons claiming un	der me ev <mark>eryth</mark> i	ng which
,	shall do or cause to be	_		
	resaid shall be valid a sereof who before the o			
me benem m such revocati		toing thereof shan	not have had he	ince of
If			s	hould die
while serving	g as my attorney-in-fa	ect or should fail o	or refuse to acce	ept this
appointment	for any reason, I here	eby nominate, con	stitute and appoi	int
		my	attorney-in-fac	t in
	stead with all	the powers and du	ties hereinabove	set fort
to be enjoyed	d or performed by my	attorney-in-fact h	erein named.	
This	Power of Attorney sha	all be revoked by	death or revocat	ion by
me in writin	g. It shall not be reve	oked by my physic	al or mental inc	apacity.
IN W	ITNESS WHEREOF, I		my hand and se	al this
	day of	June July	, 19	72 .
Witness:			•	
	this	- alma	R WILLIAM Wynne	LBEAL
Ida i	0111	Alma R.	Wynne	
- GRete	C/Co pe	_	~	
STATE OF	SOUTH CAROLINA			
	F GREENVILLE			
	SONALLY APPEARED	D Before me	C. T. leyes	he
who, being	duly sworn, says that	_he saw the withi	n namedAlma R	. Wynne
		sign, seal and a	s <u>her</u> a	ct and
,	r the foregoing Power			
Azil	le Cope	witnessed the	execution thereo	of.
	before me this		·	<u></u>
<u>19</u> da	y of June full	,19 72	1. V J //V	1e
6.4	C. Cope			
Notary Pub	olic for South Carolina	(SEAL)		

My Commission Expires: 11/19/79

Recorded May 19, 1981 at 9:15 A/M

32151

judišti ir ģieloju**sēt prie**rībot — **Lije**